


<p>Name of Policy: Standard of care committee.</p> <p>Policy Number: 3364-10-03</p> <p>Approving Officer: Provost and Executive Vice President For Health Affairs</p> <p>Responsible Agent (s): Senior Legal Counsel, Health Science Campus</p> <p>Scope: The University of Toledo</p>	 <p>Effective date: July 1, 2008</p>
<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy
<input checked="" type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Reaffirmation of existing policy

(A) Policy statement

The university will create and maintain a standard of care committee (“committee”), as part of its litigation management process that will review care for standard of care issues that lead to claims or potential claims. The committee will then take action to correct any standard of care concerns, improve patient safety and reduce future risk exposures to the university and the faculty practice plans (“FPPs”) or other entities or individuals insured by the university’s insurance program.

(B) Purpose of policy

The committee is established to evaluate litigation claims, improve patient safety and reduce future risk.

(C) Committee functions

- (1) Case reviews will be done on all claims and potential claims filed against the university, FPPs, affiliated practitioners who participate in the university insurance program, and residents, students or employees of the university in accordance to the professional liability claims reporting and risk management policy (GC-001).
- (2) The office of legal affairs - health science campus (“HSC”) will cause a preliminary audit to be conducted of all claims and potential claims to be reviewed by the standard of care committee.
- (3) The committee will discuss each claim and potential claim presented to determine whether:
 - (a) the standard of care was met;
 - (b) the standard of care was met, but there are concerns; or
 - (c) the standard of care was not met.

- (4) The committee will assess responsibility of any standard of care issues and allocate the portion of responsibility amongst the parties.
- (5) The office of legal affairs-HSC will direct the committee's determination to the proper channels, including the claims management committee.
- (6) All issues with regard to a finding that the standard of care was not met will be provided to the performance improvement committee. Action will be taken as appropriate by the performance improvement committee to educate and improve patient safety and quality of care. The office of legal affairs – HSC, with support of risk management, will make sure this continues to happen.

(D) Committee membership

Members of the standard of care committee will be:

- Provost for Health Affairs (Chair);
- FFP President;
- FFP Vice President;
- Hospital Executive Director;
- Chief of Staff;
- Medical Director;
- Associate Executive Director;
- Six hospital medical staff members (appointed by the Committee Chair);
- Director of the Emergency Department;
- Director of Quality Assurance;
- Legal Counsel*;
- Risk Management*;
- Finance*.

* Non-voting members

(E) Meetings

The standard of care committee will meet monthly or as often as necessary.

(F) Protected information

The standard of care committee performs quality assurance activities and is an integral part of university's peer review and quality assurance process. Those sections of the Ohio Revised Code pertaining to immunity and confidentiality of peer review and quality assurance committees apply to the standard of care committee. The standard of care committee also supports legal counsel in litigation preparation, defense, and resolution decisions. The activities of this committee, including any information, data, reports, or records are part of peer review records as well as attorney–client privileged/work product, and are protected from disclosure.

(G) Definitions

